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21807 7590 07/07/2009

IAN F. BURNS & ASSOCIATES
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PJ Panzica	(Depositor's name)
/di panzica/	(Signature)
10/6/2009	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/811,104	03/26/2004	Jerald C. Seelig	619.807	9225

TITLE OF INVENTION: IMAGE ALIGNMENT GAMING DEVICE AND METHOD

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	<input checked="" type="checkbox"/>	\$261,510.00	\$300	\$0	\$261,810	10/07/2009

EXAMINER	ART UNIT	CLASS-SUBCLASS
TORIMIRO, ADETOKUNBO OLUSEGUN	3714	463-016000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.	1. <u>Ian F. Burns & Associates, P.C.</u> 2. _____ 3. _____
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Atlantic City Coin & Slot Service

Pleasantville, NJ USA

Company, Inc.

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

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<input checked="" type="checkbox"/> Issue Fee	<input type="checkbox"/> A check is enclosed.
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Authorized Signature 

Date **October 06, 2009**

Typed or printed name **Ian F. Burns**

Registration No. **33,297**

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